11000085599

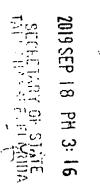
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only

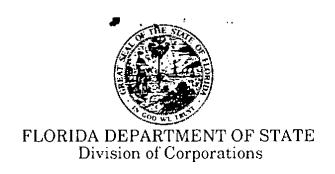


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V SULKER SEP 1 8 2019



September 16, 2019

THALIA HOMES 4211 W WATERS AVENUE STE A TAMPA, FL 33614

SUBJECT: THALIA HOMES, LLC Ref. Number: L10000085599

We have received your document for THALIA HOMES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person resigning must sign the document

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 319A00019001

Yasemin Y Sulker Regulatory Specialist III

www.sunbiz.org

CR2E079 (2/14)

s . .

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJ						
	(Name of Lim	(Name of Limited Liability Company)				
The er	nclosed member, resignation or dissoci	ation and fee	(s) are submitted for filing.			
Please	return all correspondence concerning	this matter to	;			
Migue	el A. Aguiar-Delgado					
	(Contact Person)		_			
Thalia	Homes, LLC					
	(Fint/Company)					
4211	W. Waters Avenue, Ste. A					
	(Address)		_			
Tamp	a, FL 33614					
	(City/State and Zip Code)		_			
For fur	ther information concerning this matte	er, please call:	:			
Migue	l A. Aguiar-Delgado	813 at (308-0 6 55			
	(Name of Contact Person)	(Area Code	e & Daytime Telephone Number)			
Enclose 國 \$25	ed please find a check made payable to Filing Fee		Department of State for: g Fee & Certified Copy			
Registr Divisio Clifton 2661 E	ET/COURIER ADDRESS: ation Section on of Corporations Building Secutive Center Circle essee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			

CR2E079 (2/14)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

	limited liability company as it app a Homes, LLC		ida Department
	ment/registration number assigned		iny is:
Rrian David M	nber/manager withdrew/resigned (9/2019
4. I,	me of Person Resigning)	hereby withdraw/resign as a	201 725
Manager	we of the oreal resigning,		9 SE
(rinii liile)		
of this limited liab resignation in writ	ility company and affirm the limit ing.	ed liability company has been	notified of many 3: 16
Signature of Dis	sociating Member or Resigning N	lanager	P
	\$25.00 (Required) \$30.00 (Optional)		